RECEIVED
FEC MAIL
OPERATIONS CENTER

FEC FORM 2 STATEMENT OF CANDIDACY

7005 DET 31 A 9: 44

 (a) Name of Candidate (in full) 						
W. Curtis Weldon				M	_	
(b) Address (number and street)	☐ Check if address changed	12	E. Identification FEC #CO(
96 Tanguy Road (c) City, State, and ZIP Code	·	•	3. Is This	New seem		Amended
No	r v	· `	Statement	8 8	OR	(A)
Glen Mills, PA 1934 4. Party Affiliation		6. State & District		ASSESS.		
	U.S. House of Repres.	Pennsyl	vania -	7th Dis	strict	t
	SIGNATION OF PRINCIPAL					
	ned political committee as my Principal C		7	006	election	(s).
7. I filetory designate the following fac-	rest parinosi soni interes as my morph		(уеа	r of election)		,-
NOTE: This designation should be f	filed with the appropriate office listed in the	e instructions.				
(a) Name of Committee (in full)						
	Count page					
The Weldon Victory	Committee					
(b) Address (number and street)						
P. O. Box 1992						
(c) City, State, and ZIP Code	·····					
(2) 2131 2210 211 211 212					-	•
Media, Pennsylvani	a 19063			į		
DE	CICNATION OF OTHER AUT	HODIZED C	CHARACTEC	=0		••••
DE	SIGNATION OF OTHER AUT (Including Joint Fundralsing					
9. I horoby suithorize the following non	ned committee, which is NOT my principa				,	n behalf of my
candidacy.	ned committee, which is not my participa	cempaign éann	with the contraction of	in in the second		Tourse in the
•						
NOTE: This designation should be f	filed with the principal campaign committe	é . ,				
			<u> </u>			
(a) Name of Committee (in full)		1 45 - 1 - 1				
(a) Name of Committee (in full)						
(a) Name of Committee (in full)			eseri.			
(a) Name of Committee (in full) (b) Address (number and street)				** * * * * * * * * * * * * * * * * * *		
:			1 1 1 1 1	** * * * * * * * * * * * * * * * * * *		
(b) Address (number and street)			in the second of	al a region		·
<u> </u>			1 1 1 1 1	al a region		:
(b) Address (number and street)			in the second of	al a region		· :
(b) Address (number and street) (c) City, State, and ZIP Code	*	4 = 1			·.	y)
(b) Address (number and street) (c) City, State, and ZIP Code	OF INTENT TO EXPEND PER	SONAL FUN			·.	y)
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION Code 9. I intend to expend personal funds a	OF INTENT TO EXPEND PER:	SONAL FUN	DS (House	or Sana	te Onl	y)
(b) Address (number and street) (c) City, State, and ZIP Code	OF INTENT TO EXPEND PER	SONAL FUN		or Sana	te Onl	y)
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION Code 9. I intend to expend personal funds a	OF INTENT TO EXPEND PER: exceeding the threshold amount (see 11 C	SONAL FUN	DS (House	or Sana	te Onl	y)
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION Code 9. I intend to expend personal funds a	OF INTENT TO EXPEND PERSocreeding the threshold amount (see 11 C	SONAL FUN	DS (House	or Sana	te Onl	y)
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION Code 9. I intend to expend personal funds a	OF INTENT TO EXPEND PER: exceeding the threshold amount (see 11 C	SONAL FUN F.R. 400.9) by 0,000	DS (House for the primar for the genera	or Sana y election, an	i te On l	y)
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION C 9. I intend to expend personal funds a	SF INTENT TO EXPEND PERSocreting the threshold amount (see 11 C) 9A 98 onal funds exceeding the threshold amount	SONAL FUN F.R. 400.9) by 0 0 0	for the genera on, you must ex	e or Sana y election, and al election. Inter "0.00" fo	r each.	· .
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION C 9. I intend to expend personal funds a If you do not intend to expend personal funds as	OF INTENT TO EXPEND PER: exceeding the threshold amount (see 11 C	SONAL FUN F.R. 400.9) by 0 0 0 nt for either elections knowledge and	DS (House for the primare on, you must exided the belief it is true	e or Sana y election, and al election. Inter "0.00" fo	r each.	· .
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION C 9. I intend to expend personal funds a	SF INTENT TO EXPEND PERSocreting the threshold amount (see 11 C) 9A 98 onal funds exceeding the threshold amount	SONAL FUN F.R. 400.9) by 0 0 0 nt for either elections knowledge and	for the genera on, you must ex	e or Sana y election, and al election. Inter "0.00" fo	r each.	· .
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION Code I intend to expend personal funds a light of the state of Candidate.	SF INTENT TO EXPEND PERSocreting the threshold amount (see 11 Constant of the second o	SONAL FUN F.R. 400.9) by 0 0 0 nt for either elections knowledge and	DS (House for the primare on, you must exided the belief it is true	e or Sana y election, and al election. Inter "0.00" fo	r each.	· .
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION C 9. I intend to expend personal funds a If you do not intend to expend personal funds a	SF INTENT TO EXPEND PERSocceeding the threshold amount (see 11 C) 9A 9B conal funds exceeding the threshold amount in this Statement and to the best of the control of t	SONAL FUN F.R. 400.9) by 0 0 0 nt for either elections knowledge and	DS (House for the primare on, you must exided the belief it is true	e or Sana y election, and al election. Inter "0.00" fo	r each.	· .
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION C 9. I intend to expend personal funds a I you do not intend to expend person I certify than have expending the state of Candidata.	SF INTENT TO EXPEND PERSocreting the threshold amount (see 11 Constitution of the second of the seco	SONAL FUN F.R. 400.9) by 0,000 nt for either elections knowledge and	DS (House for the primare for the genera on, you must ea d belief it is true Date	e or Sans y election, and all election. Inter "0.00" for	te Onl	g.
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION C 9. I intend to expend personal funds a I you do not intend to expend person I certify than have expending the state of Candidata.	SF INTENT TO EXPEND PERSocceeding the threshold amount (see 11 C) 9A 9B conal funds exceeding the threshold amount in this Statement and to the best of the control of t	SONAL FUN F.R. 400.9) by 0 0 0 nt for either elections knowledge and	DS (House for the primare on, you must experied it is true this Statement	e or Sans y election, and all election. Inter "0.00" for	te Onl	g.
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION C 9. I intend to expend personal funds a I you do not intend to expend person I certify than have expending the state of Candidata.	SF INTENT TO EXPEND PERSocreting the threshold amount (see 11 Constitution of the second of the seco	SONAL FUN F.R. 400.9) by 0,000 nt for either elections knowledge and	DS (House for the primare for the genera on, you must ea d belief it is true Date	e or Sans y election, and all election. Inter "0.00" for	te Onl	g.
(b) Address (number and street) (c) City, State, and ZIP Code DECLARATION C 9. I intend to expend personal funds a I you do not intend to expend person I certify than have expending the state of Candidata.	PF INTENT TO EXPEND PER exceeding the threshold amount (see 11 Company of the second second funds exceeding the threshold amount funds of the best of the best of the second seco	SONAL FUN F.R. 400.9) by 0 0 0 nt for either elections my knowledge and	DS (House for the primare on, you must experied it is true this Statement	e or Sans y election, and all election. Inter "0.00" for	te Onl	g.

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked USPS Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label Postmarked USPS Express Mail Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

(3/2005)